

PALOMAR COMMUNITY COLLEGE DISTRICT

Employee Benefit Orientation



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MEDICAL & EAP BENEFITS

Medical Insurance Options

- Kaiser Permanente HMO: \$0 Employee Contribution
 - Group Number 234480-0073 (link to [Plan Summary](#))
 - No deductible, no office co-pay, \$5 for pharmacy
 - Provider Search: <https://healthy.kaiserpermanente.org/>
- Kaiser Permanente HDHP with HSA: \$0 Employee Contribution
 - Group Number 234480-0075 (link to [Plan Summary](#))
 - DEDUCTIBLE: \$1,500 Single/\$3,000 Family
 - January 1, 2024 deductible increase \$1,700 Single/\$3,400.00 Family
 - District funded HSA: \$3,300.06 Single/\$6,600.03 Family
 - Contribute pre-tax funds to your HSA ([click here](#))
- SISC Anthem PPO: EE \$199/E1 \$392/ EF \$550 (12)mo. Contribution Amount
 - Group Number 40795A (link to [Plan Summary](#))
 - No deductible, \$10 office co-pay, \$5/\$20/\$50 for pharmacy
 - Provider Search: ([Click Here](#))

SISC Anthem HMO: \$0 Employee Contribution

- Group Number 57APGA (link to [Plan Summary](#))
- No deductible, \$20 primary co-pay, \$40 specialist co-pay, \$250 admission co-pay, \$100 ER co-pay, \$9/\$35 for pharmacy
- Provider Search: ([Click Here](#))

• SISC Anthem 80E PPO: \$0 Employee Contribution

- Group Number: Single 40795E (link to [Plan Summary](#))
- DEDUCTIBLE: \$300 Single/\$600 Family
- \$20 co-pays
- 20% Coinsurance for hospitalization, scans, diagnostic/lab procedures, and chiropractic
- Provider Search: ([Click Here](#))

Employee Assistance Programs

- Anthem EAP (for Kaiser and PPO members)
 - Free services for you and your household members (limited number of sessions)
 - Counseling, addiction recovery, dealing with ID theft, legal advice, financial planning
 - (800)999-7222 company code SISC
 - www.anthemEAP.com company code SISC



DENTAL BENEFITS

Delta Preferred Option PPO

- Employee (12) Monthly Contribution: \$44.30
- Utilize Delta Dental PPO list of network providers ([click here](#))
- Group Number 7046-03905 (member phone number 866/499-3001)
- Each member has a \$1,500 insurance benefit per calendar year ([Plan Summary](#))
- Diagnostic and preventative services are covered 100%
- Basic Services are covered 90%, member pays 10%
- Crowns, cast restorations and prosthodontic services are covered 60%
- Orthodontics are covered t 50% up to \$1,000 lifetime benefit
- No member ID cards will be issued for this plan ([instructions](#))

DeltaCare USA Option DHMO

- \$0 Employee Premium Contribution
- Must use the DeltaCare USA list of network providers ([click here](#))
- Group Number 71691-03001 (member phone number 800/422-4234)
- Each member has unlimited annual dental coverage ([Plan Summary](#))
- Preventative services are covered 100%
- The cost for other plan services are listed in the plan summary attached above
- This plan has enhanced orthodontic benefits but you must use a DeltaCare USA orthodontist
- Member ID cards will be issued for this plan or you can [download a copy](#) of your card.

EYEMED VISION BENEFITS

- \$0 Employee Premium Contribution
- Utilize the [EyeMed](#) list of in network providers ([Plan Summary](#))
- Group Number 1018355-1001 (Member phone number 866/804-0982)
- Free exam every 12 months (Eye glasses and Conacts)
- Up to \$250 frame allowance every 12 months
- Free single vision, lined bifocal, and lined trifocal lenses every 12 months
- Or \$180 allowance for contacts and exam every 12 months
- Extra savings on prescription sunglasses and laser vision correction
- You will receive member ID cards and a welcome packet in the mail at your home

LIFE/AD&D AND LONG TERM CARE BENEFITS

Life and AD&D Insurance

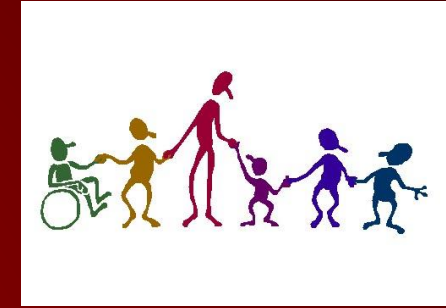


Long Term Care Insurance

- \$0 Employee Premium Contribution
- Policy Number 70654-0GAT2 ([policy information](#))
- Employee term life insurance worth \$80,000
- This policy includes [travel insurance](#)
- Employee Accidental Death and Dismemberment insurance worth \$80,000
- Value of the policy will reduce by 50% when the employee reaches the age of 70

- \$0 Employee Premium Contribution
- Policy Number 105200 ([policy information](#))
- Covers services provided to an employee by an in-network Nursing Facility
- Pays the facility up to \$1,000 per month
- Maximum duration of the benefit is 2 years
- For questions about this plan you can contact (800)227-4165

LONG TERM DISABILITY BENEFITS



- Policy Number 70654-0LTD2011 ([Policy Information](#))
- This policy replaces California State Disability Benefits
- Employee sick leave is intended to serve as short term Disability income
- Employee is eligible for income replacement after 90 days of disability
- Benefit amount is 66 2/3% of the employee base income up to a maximum of \$7,500 per month
- If the employee becomes disabled prior to age 68 then the benefit is in place until age 70
- If the employee becomes disabled at 68 or older then the maximum benefit is 24 months
- There is a survivor income benefit should the employee pass away
- The policy will not provide coverage for a pre-existing condition that causes a period of Disability beginning within the first 12 months of the effective date of coverage

RETIREMENT PENSION BENEFITS



CalPERS

WHO PARTICIPATES?

Classified employees and academic/educational employees who have prior CalPERS service eligibility

EMPLOYEE CONTRIBUTION:

Classic (CalPERS member on or before 12/31/2013) = 7%
PEPRA (CalPERS member on or after 1/1/2014) = 8%

SCHOOL EMPLOYER CONTRIBUTIONS

WELCOME TO CALPERS

[MyCalPERS Portal \(Login Information\)](#)

PALOMAR RETIREMENT BENEFITS

CalSTRS

WHO PARTICIPATES?

Academic employees

EMPLOYEE CONTRIBUTION:

Classic (CalSTRS member on or before 12/31/2013) = 10.25%
PEPRA (CalSTRS member on or after 1/1/2014) = 10.205%

SCHOOL EMPLOYER CONTRIBUTIONS

WELCOME TO CALSTRS

[MyCalSTRS Portal \(Login Information\)](#)

PALOMAR RETIREMENT BENEFITS

APPLE

WHO PARTICIPATES?

Permanent classified less than 50% contract, short term employees, part time faculty

EMPLOYEE CONTRIBUTION:

5%

EMPLOYER CONTRIBUTION:

2.5%

PLAN INFORMATION

WEBSITE LINK

These funds can be used to purchase [CalPERS](#) or [CalSTRS](#) service credit. You will start that process with CalPERS or CalSTRS.

[Form to rollover or liquidate APPLE funds](#)

OPTIONAL INSURANCE AND INVESTMENTS

Optional Insurance Benefits

Additional information found at:

[Voluntary Benefits – Human Resource Services \(palomar.edu\)](#)

- **Voluntary Term Life**
 - Up to \$200,000 is guaranteed to be issued for a new hire applying within their first 30 days ([Click here](#))
 - And up to \$50,000 is guaranteed for a spouse as long as the employee applies \$100,000
- **AD&D – guaranteed issue**
- **UNUM Long Term Care**
 - This increases the benefit provided by Palomar
- **Hyatt/MetLaw Legal Plan – Legal HMO**
 - ([plan summary/enrollment](#))
- **Aflac Products**
 - Contact Jill Krenkler (760)473-8023 jill_krenkler@us.aflac.com
Cancer, Accident, Short Term Disability, Vision, Life
- **American Fidelity FSA & Optional Products**
 - Contact Michelle Kramer or Beth Park (951)600-0122
 - Michelle.Kramer@americanfidelity.com or beth.park@americanfidelity.com
 - Flexible Spending Accounts (Medical & Dependent Care), Cancer, Accident, Short Term Disability, Life

Pre and Post Tax Investments

Additional information found at:

[Retirement Savings Plans – 403\(b\)/457\(b\) – Human Resource Services \(palomar.edu\)](#)

- **Empower Retirement 403(b), 457(b), and Roth 403(b)** [Universal availability notification](#)
 - Free Empower Retirement Planning Services provided by [Miguel Marin](#) (800) 701-8255
- **Additional approved 403(b) investment providers are located at the [SDCOE Deferred Compensation Website](#)**

The approved vendors from this list must be contacted directly in order to establish an account



INSURANCE & REGULATORY NOTIFICATIONS

- [Insurance Carrier HIPAA Notifications](#)
- [District Life Insurance Taxability Notification](#)
- [Insurance Coordination of Benefits Rule](#)
- [California Insurance Exchange Notice \(Spanish\)](#)
- [Medicare Prescription Drug Coverage Notice \(Spanish\)](#)
- [COBRA General Notice](#)
- [California Unemployment Program Notice](#)
- [Industrial Injury Information](#)
- [Workers Compensation Pre-Designation of Personal Physician](#)



BENEFIT OFFICE CONTACT INFORMATION

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